

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.
15115.112001

In Re Application Of: **Yojiro SARUWATARI et al.**

Serial No.

Filing Date

[Herewith]

Examiner

Group Art Unit

Title: **ELECTROMAGNETIC RELAY**

Address to:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

37 CFR 1.97(b)

1. ☒ The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.

37 CFR 1.97(c)

2. ☐ The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:

☐ the statement specified in 37 CFR 1.97(e);

OR

☐ the fee set forth in 37 CFR 1.17(p).

22511

PATENT TRADEMARK OFFICE

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.
15115.112001

In Re Application: **Yojiro SARUWATARI et al.**

Serial No.

Filing Date
[Herewith]

Examiner

Group Art Unit

ELECTROMAGNETIC RELAY

Payment of Fee

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- ☐ A check in the amount of _____ is attached.
- ☐ The Director is hereby authorized to charge and credit Deposit Account No. _____ as described below.
- ☐ Charge the amount of _____
- ☐ Credit any overpayment.
- ☐ Charge any additional fee required.

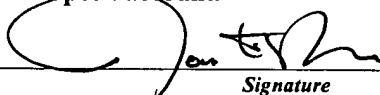
Certificate of Transmission by Facsimile*

I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (F:	
_____ (Date)	
_____ Signature	
_____ Typed or Printed Name of Person Signing Certificate	

Certificate of Mailing by First Class Mail

I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
_____ Signature of Person Mailing Correspondence	
_____ Typed or Printed Name of Person Mailing Certificate	

*This certificate may only be used if paying by deposit account.


Signature

Jonathan P. Osha, Reg. No. 33,986
OSHA & MAY L.L.P.
1221 McKinney Street, Suite 2800
Houston, TX 77010

Tel: (713) 228-8600
Fax: (713) 228-8778



Dated: _____

CC:

INFORMATION DISCLOSURE STATEMENT (Use several sheets if necessary)	ATTY. DOCKET NO.: 15115.112001	SERIAL NO.:
	APPLICANT: Yojiro SARUWATARI et al.	
	FILING DATE: [Herewith]	ART UNIT:

U.S. PATENT DOCUMENTS				
EXAMINER INITIALS	REF	DOCUMENT NO.	DATE	APPLICANT'S OR PATENTEE'S NAME

FOREIGN PATENT DOCUMENTS						
EXAMINER INITIALS	REF	DOCUMENT NO.	DATE	COUNTRY	TRANSLATION	
					YES	NO
	A1	WO 01/48777 A1	07/05/2001	WIPO	X	

OTHER DOCUMENTS		
EXAMINER INITIALS	REF	(Include Author, Title, Date, Pertinent Pages, etc.)

EXAMINER:	DATE CONSIDERED:
EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.	